



HAWAII STATE ETHICS COMMISSION
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P.O. BOX 616, HONOLULU, HAWAII 96809
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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST				
NAME (Last)		(First)	(Middle)	TELEPHONE
Iwamoto,		Karen	H.	847-4666, ext 202
MAILING ADDRESS (Street)				FAX
1727 Dillingham Blvd.				842-0129
(City)		(State)	(Zip Code)	
Honolulu,		Hawaii	96819	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)				TELEPHONE
MAILING ADDRESS (Street)				FAX
(City)		(State)	(Zip Code)	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Building Industry Association of Hawaii			847-4666, ext 202
MAILING ADDRESS (Street)			FAX
1727 Dillingham Blvd.			842-0129
(City)		(State)	(Zip Code)
Honolulu,		Hawaii	96819
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Karen H. Iwamoto			847-4666, ext 202
MAILING ADDRESS (Street)			FAX
1727 Dillingham Blvd.			842-0129
(City)		(State)	(Zip Code)
Honolulu,		Hawaii	96819

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture

☒ Education

Human Services

Science, Technology &
Economic DevelopmentCommunications &
Public Utilities☒ Government Operations &
Finance☒ Intergovernmental Relations,
International Affairs

Tourism & Recreation

☒ Consumer Protection &
Commerce

Hawaiian Affairs

☒ Labor & Employment☒ TransportationCulture, Arts, Historic
Preservation

Health

☒ Planning, Land & Water
Use Management

Other: (indicate below)

☒ Ecology, Energy
Environmental Protection☒ Housing☒ Public Safety & Corrections**PART IV CERTIFICATION OF LOBBYIST***I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*Karen H. Iwamoto

(Signature of Lobbyist)

3/15/06

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Karen H. IwamotoChief Executive Officer

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Building Industry Association of Hawaii847-4666, ext 202

MAILING ADDRESS (Street)

FAX

1727 Dillingham Blvd.842-0129

(City)

(State)

(Zip Code)

HonoluluHawaii96899*I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.*Karen Z. Nakamura3/16/06

(Signature of Authorizing Officer or Person Represented)

(Date)